

Amanda Harrington  
Testimony Submitted to Senate Committee on Health February 27, 2008  
Support for SB 398

I am here to offer my support for SB 398, which repeals Wisconsin State Statute 940.04, our state's archaic ban all abortion procedures. I am grateful to Representative Berceau for once again introducing this important legislation and to you, Senator Erpenbach, for scheduling a hearing on this bill. I appreciate the political courage both of you demonstrate by acting to remove language from our law books that allows the state to force me and other women to carry all our future pregnancies to term, ultimately impinging on what I believe to be the most personal and private relationships on this earth—that between an individual and his or her body.

Although I speak before you as one of the thousands of women in this state who will be directly impacted by statute 940.04 if *Roe v. Wade* is overturned any time soon, I don't believe that our debate today should necessarily be about a woman's right to reproductive autonomy. After all, repealing 940.04 will not broaden access to abortion; the numerous restrictions that the federal and state government imposes on women's reproductive decisions will remain intact when 940.04 is repealed. What changes when this law is repealed is that the abortion issue in Wisconsin is no longer hampered by a patently offensive, anachronistic blanket prohibition that in all practicality is unenforceable. After all, what exactly happens when *Roe v. Wade* is overturned and the state has the burden of enforcing this law? How do you imagine it? What precisely will the state of Wisconsin do to ensure that every woman who becomes pregnant stays pregnant until she produces a baby? Will Wisconsin ensure full coverage for pre- and post- natal care to its women? Or will you put those of us who are considered "at risk" for abortion behind bars until we give birth in shackles?

Wisconsin's criminal abortion statute was written at a time when these questions were not only irrelevant, but would never have been considered. In the late 1800s, women were routinely institutionalized as treatment for "female hysteria," which illustrates my fundamental opposition to keeping 940.04 on the books: It is old. It is hurtful. It is a reminder of the painful historical fact that for many years women were considered chattel in the eyes of the law, not as individuals worthy of the same autonomy as men. After all, this law was written at a time when women didn't have rights to property, when women could not make legal contracts without the consent of their fathers or husbands and when just a few hundred miles south, millions of women

were bound not only by law, but by the physical chain of slavery. This law was written at a time when real women, not unlike the fictional Hester Prynne, were responsible for bearing the full brunt of sexual impropriety. Truly, this law needs to be repealed because it is born out of the same misogynistic mindset as the customs I've just outlined, customs that extend from the great historical embarrassment called witch-hunts. In fact, in its historical context this law is a doubly insulting witch-hunt itself, since it not only criminalizes women as patients, but also women serving as midwives and health care practitioners at a time when modern obstetrics and gynecology had not yet entered into frontier medicine.

As I hope I've made clear, this law dates from a time that has very little to do with the social, cultural and political realities we face today. If it did, I wouldn't be here—my very presence before this legal body would not have been permissible in 1849. Senators Roessler, Vinehout and Lazich: You wouldn't be here either. At least, you wouldn't be here if countless other antiquated laws dismissive of women's rights had not been removed from our law books. I think it goes without saying that Wisconsin owes many debts not only to the countless women disenfranchised in its history, but also to its women residents today who are courageous enough to cross hostile lines of self-righteous protestors standing between them and the mere four abortion clinics in this state. In a quiet act of defiance, these women transgress a vocal minority's successful yet unjust work to perpetuate a social order that suppresses the limitless talents and contributions we women make when given many choices.

So today, *you* have a choice: You can choose to endorse an offensive, anachronistic, unenforceable law remnant of a deeply dark period in American history for women. Or, you can pass SB 398, choosing instead to follow the Wisconsin traditions that make me so proud to be a woman in this state: We were the first state to ratify the 19<sup>th</sup> Amendment in 1919; we ratified the Equal Rights Amendment in 1972; last Spring, this very committee passed the Compassionate Care for Rape Victims Act, giving it the momentum it needed to pass both houses of the legislature. Repealing 940.04 follows in *this* tradition. And this, I believe, is a tradition we all can be proud of.



TESTIMONY OF KELDA HELEN ROYS  
ON BEHALF OF NARAL PRO-CHOICE WISCONSIN  
SUPPORTING THE WOMEN'S HEALTH & SAFETY ACT

To: Members of the Wisconsin State Senate Committee on Health, Human Services, Insurance, and Job Creation  
From: Kelda Helen Roys, Executive Director of NARAL Pro-Choice Wisconsin  
Re: Support for SB 398, Women's Health & Safety Act  
Date: February 27, 2008

On behalf of our over 35,000 statewide members, I am proud to appear before the committee, and I thank you for holding a hearing on this critically important legislation.

NARAL Pro-Choice Wisconsin believes in a culture of freedom and personal responsibility – that means ensuring that women have the full range of reproductive options available to them, including access to safe, legal abortion. Being pro-choice encompasses supporting all women's reproductive choices, from preventing unintended pregnancy to bearing healthy children. We are working hard to reduce the need for abortion and improve access to preventive care, yet we must make sure that safe, legal abortion remains an option for those women who need it.

NARAL Pro-Choice Wisconsin supports the original framework of *Roe v. Wade*, which lays out a governmental interest in protecting the fetus, that increases throughout pregnancy, as well as an individual's constitutional right to control her own body and determine her own reproductive destiny, including by terminating a pregnancy.

Abortion is a medical procedure that more than a third of American women will need at some point in their lives. It is a personal, private decision between a woman and her doctor. What abortion is not – and never should be again – is a crime. When abortion is illegal, women die. It is out of that concern that we advocate for the availability of safe, legal abortion. Because we believe that women's lives matter, and that they should not be used as political fodder.

The Women's Health & Safety Act is urgently needed in Wisconsin to ensure that we do not go back to the dark ages, where women who needed abortion care were criminals, risking their health, safety, and their lives to terminate their pregnancies.

Unfortunately, under current Wisconsin law, we could face exactly that circumstance. The Wisconsin statutes still contain an archaic provision dating to the 1840s, which makes it a crime to have or assist a woman in terminating a pregnancy. The law is astonishing in its scope and draconian in its penalties. It bans virtually every abortion, even those necessary to preserve a woman's health, and even those of pregnancies resulting from rape and incest. It provides up to fifteen years in prison, and up to \$50,000 in fines for doctors who aid a woman in obtaining abortion care. Unlike the several other states with pre-Roe abortion bans still on the books, ours is the only one that provides for criminal penalties against women – up to 3 ½ years in prison and \$10,000 in fines.

27 February 2008

To the members of the legislature, and to all here present:

My name is Lena G. Wood, and I am in strong opposition to SB 398.

I am giving testimony today because of my own experience with abortion.

In 1995, when I was nineteen years old, I was living with a boyfriend. I became pregnant very early into our relationship. When I told him I was pregnant, he made it clear that he didn't want any children. I was afraid of losing him, and I felt like I didn't have any other choice but to have an abortion.

I went to a local Planned Parenthood office for help. Only now am I aware that in their "counseling" of me, they side-stepped their legal obligation to inform me of both the dangerous side-effects of having an abortion and my alternatives to having an abortion. In fact, there was no counseling. The only option they spoke of was making an appointment to abort the pregnancy, which they strongly urged me to do.

On the day of my abortion, I felt numb and disconnected as I sat in the waiting room. This all seemed like a bad dream. I was so afraid, but I didn't know what else I could do. I was going through with this because I didn't feel I had any other choice.

The abortion was cold and quick. The abortionist and his assistant used a machine that made a loud sound. I felt sharp pain. I remember feeling like I was on an assembly line.

The next thing I remember, I was being taken to another room with many reclining chairs. I was given some strong drugs and told to sit and rest for a while. They also gave me something small to eat.

I noticed that I was among other women in the same room. There was a very awkward silence, because we all knew what had just happened to each of us.

I remember feeling horrible immediately. The pain was in my lower body, and it was very intense. A short while later, I was escorted to the back door which led to the parking lot, and I left.

My health got worse and worse from that day. For almost the entire week following, I was running a serious fever of nearly 105 degrees. I called Planned Parenthood to let them know of my condition, and to ask for help and advice. Their response was that I had the flu, and that I should take Tylenol.

A friend took notice of my condition, and, thanks to her persistence, she finally persuaded me to go to a walk-in clinic with her. She was sure there was something really wrong with me. At the clinic, there was panic, and I was immediately taken to the hospital.

Eight days after having my abortion, I was admitted to the hospital and put in the intensive care unit. During my first two days there, I worsened, despite broad spectrum I.V. antibiotics. My family was told that I could die.

My body was shutting down, due to major infection from septic abortion, caused by the failure of the abortionist to remove all of the remains of my child from my uterus. I also had acute pyelonephritis, sepsis, pneumonia, and presumed congestive heart failure. I was attached to a heart machine, and I had a tube in my throat so I could breathe.

Because my condition was not improving, I had to have emergency surgery in the middle

of the night. My body was so swollen, I was told that I looked like I was nine months pregnant. During my emergency surgery, 300 cc of bloody peritoneal fluid was removed from my body.

Things seemed to get better after several weeks in the ICU, and I was relocated to recovery. However, I became ill with pancreatitis from an antibiotic I was given during recovery. Thankfully, I survived, continued on with my life, and tried to put the whole thing behind me.

There is one more thing I need to point out about my experience. I never received a hospital bill, and neither did my family, my boyfriend, or anyone else I knew. I believe Planned Parenthood settled my hospital bills quietly, without my knowledge. This was done, perhaps, to cover up their almost-deadly mistake.

Even though I made it through the immediate physical consequences, the worst was yet to come. I dived deep into drug and alcohol abuse, and I was severely depressed. The relationship I had with my boyfriend continued for a time, and we were verbally and physically abusive with each other.

I remember a specific night over a year later when, in a drugged state of mind, I climbed onto the roof of my apartment building, and cried out in anger to God. I said something like "Oh God, if you are real, tell me, Why am I alive? What is the purpose of my life? Why am I here?" I almost jumped off the roof that night to attempt to end my life.

However, I never made that terrible mistake, and I'm glad I didn't. Since that day, I have experienced healing, both in my faith and through acknowledging and naming my child. His name is Stephen Gregory, and I stand here today in his honor.

Even with the healing I have experienced, I still feel the effects in my daily life, and I will, to some extent, until my dying day.

My story is a microcosm of what thousands of others have also experienced through abortion. There is much evidence today, showing that, like me:

~Women who experience abortion are more likely to:

- abuse drugs and alcohol,
- have emotional and psychological problems, and
- struggle with feelings of guilt, hopelessness, and temptations to commit suicide.

In addition, these women are also more likely to have repeated abortions, continuing the cycle. Thankfully, this was not my experience.

Also, statistically, because of my one abortion, I have a much greater risk of developing breast cancer. Those women who have more than one abortion have an even higher risk than I do.

Aside from these facts, abortion providers are among the least regulated in the medical field. As in my case, a woman's right to know all her options is often side-stepped.

**Abortion hurts women. It is never in a woman's best interest to have an abortion. Never.**

To the members of the legislature, I encourage you: Vote against SB 398! Save Statute 940.04!

Thank you all for listening to my testimony.

I am Cathy Thompson speaking on behalf of the Wisconsin Religious Coalition for Reproductive Choice. I want to thank the committee for allowing me to testify in support of the Women's Health & Safety Act .

Those who have been to hearings before that deal with the topics of reproductive freedom know the surreal experience of hearing from one group focused solely on what is happening **inside** a seemingly detached uterus and then **everyone else** focused **outside** the uterus on the *needs of pregnant women, their families and society*.

For clergy, who have made themselves available to help women and/or couples facing unwelcome pregnancies, there has always been recognition of the tragic **conflict of the potential person developing inside and the pregnant person**. Christian ethicists have observed that the pregnant person is in living relationship with God and others. Thus, for many in society, the religious community and in scripture (Exodus 21:22-25) the pregnant person has *greater value* than the potential within her.

Also most of the world's religions revere somewhere in their ethical core values the **right of conscience**. That is the tenet that even in the face of going against a teaching of that faith you *must not violate what your conscience tells you is the right thing to do*.

We believe in the moral agency of individuals, including women. That is, we respect their ability to make responsible moral decisions based on their own conscience without interference.

I believe these two thoughts together are the underpinnings of the majority view in our society that has prevailed for over 35 years in support of women's right to choose.

Passage of the Women's Health & Safety Act will be a major step towards bringing Wisconsin law in line with that prevailing view.

In 1967 Pro-choice clergy in New York, believing in the moral agency of women, formed the Clergy Consultation Service on Abortion to assist women seeking abortions to find safe services. The founder, Reverend Howard Moody of Judson Memorial Church in New York, was an American Baptist minister. Within a year, the clergy service had 1,400 members throughout the nation. After 40 years it's hard to realize there was ever a time when birth control was available only to married women and abortion was not legal. Nearly every hospital had wards with women suffering or dying from botched abortions. As you may recall the estimated annual death toll due to botched abortions was over a million. These clergy could not stand by and let this happen.

After the U.S. Supreme Court Roe v. Wade ruling in 1973 that group became the Religious Coalition for Abortion Rights. Today that organization is more accurately known as the Religious Coalition for Reproductive Choice.

I would like to share with the committee some excerpts of position statements pertaining to governmental interference of a woman's right to choose of some of the many faith groups actively involved in the Religious Coalition for Reproductive Choice.

**The Episcopal Church** – “We believe that legislation concerning abortion will not address the root of the problem. We therefore express our deep conviction that any proposed legislation on the part of national or state governments regarding abortions must take special care to see that **individual** conscience is respected, and that the responsibility of individuals to reach informed decisions on this matter is acknowledged and honored as the position of this Church...”

**Presbyterian Church (USA)** – “We do not wish to see laws enacted that would attach criminal penalties to those who seek abortions or to appropriately qualified and licensed persons who perform abortions in medically approved facilities...”

**United Church of Christ** – “Whereas, Scripture teaches us that all human life is precious in God's sight and teaches the **importance of personal moral freedom**; and Whereas, previous General Synods, beginning in 1971, have considered the theological and ethical implications of abortion, and have supported its legal availability, while recognizing its moral ambiguity and urging that alternatives to abortion always be fully and carefully considered; and ... Whereas, certain groups continue their efforts to reverse the Roe v. Wade decision of 1973, which affirms the right to choose a safe and legal abortion; and Whereas, abortion is a social justice issue, both for parents dealing with pregnancy and parenting under highly stressed circumstances, as well as for our society as a whole... Therefore, be it resolved, that the Sixteenth General Synod:

\* urges pastors, members, local churches, conferences, and instrumentalities to **oppose actively legislation** and amendments which seek to revoke or limit access to safe and legal abortion.”

**Union of American Hebrew Congregations (Reform Judaism)** - The UAHC has long been committed to the right of a woman to choose an abortion. We affirm the position of the 56<sup>th</sup> General Assembly of 1981, and we endorse the following resolution, adopted by Women of Reform Judaism, the Federation of Temple Sisterhoods 1989:

Affirm our unwavering commitment to the protection and preservation of the reproductive rights of women; ***pledge our presence and support wherever, whenever, and for however long our goal may require it at the federal, state and local levels of government;...***

Endorse the 1973 United State Supreme Court decision on Roe v. Wade and ***deplore all attempts, legislative and judicial, to dismantle it.***

***Oppose the criminalization of either the health professional who perform or assist at abortions or the women who receive them.***”

**United Methodist Church** – The beginning of life and the ending of life are the God given boundaries of human existence...Our belief in the sanctity of unborn human life make us reluctant to approve abortion. But we are *equally bound to respect the sacredness of the life and well-being of the mother*, for whom devastating damage may result from an unacceptable pregnancy. In continuity with past Christian teaching, *we recognize tragic conflicts of life with life that may justify abortion, and in such cases we support the legal option of abortion* under proper medical procedures...

*Governmental laws and regulations do not provide all the guidance required by the informed Christian conscience.* Therefore, a decision concerning abortion should be made only after thoughtful and prayerful consideration by the parties involved, with medical, pastoral, and other appropriate counsel."

For 35 years we have been defending the right of conscience of people, who happen to be pregnant women, against those fixated on the fetus. Their blatant disregard for women is evident in their relentless attacks on accepted standards of reproductive health care and in their blatant disregard for the right of conscience as seen daily in the 60 some so-called crisis pregnancy counseling centers in Wisconsin and in the legislation they lobby for. Their obvious attempts to control and restrict the exercise of conscience in women, who may be pregnant are clear violations of the fundamental ethical principle *that an individual's conscience may guide their own behavior but may not control or restrict the exercise of conscience in others.*

We need to bring Wisconsin law into this century by passing the Women's Health & Safety Act and to turn to its opponents and respectfully suggest they mend their unethical ways and focus on the fetuses inside women, who want to give birth, but live in poverty and have no health insurance.

I want to thank the committee for holding this hearing on the Women's Health & Safety Act.

I would be happy to try to answer any questions you might have for me.



JULIE A. MICKELSON, MD  
TESTIMONY, FEBRUARY 27, 2008

Members of the Committee:

My name is Dr. Julie Mickelson and I am testifying in opposition to Senate Bill 398. I am a practicing obstetrician gynecologist in Milwaukee. Obstetrics provides a unique and rewarding opportunity to simultaneously care for two patients, the mother and her baby. The joy on a mother's face to see her 10 week baby moving its arms and legs, its heart beating, says it all. I can think of no other field where a medical provider would do every thing possible to care for and save their patient, but then turn around and kill that patient if asked.

Scenarios occur where the baby and mother cannot both survive, such as an ectopic pregnancy. In these cases we remove the baby, but do so to save the mother. Our intent is not to directly harm the baby. Recently I cared for a patient with ruptured membranes at 22 weeks, prior to viability. The uterus became infected and in addition to starting antibiotics I had to induce labor to cure the mother of a life threatening infection. The baby lived 2 hours and the patient and family treasured those two hours. Our intent was never to directly harm the baby.

Abortion not only kills the baby but can also cause long term harm to the mother. Scientific evidence confirms abortion increases the risk of premature delivery in subsequent pregnancies and increases the risk of depression and suicide as well. I have taken care of patients who have been psychologically devastated by prior abortions.

Abortion discriminates against the imperfect baby. A mother who is encouraged to abort her baby that may have a handicap will always wonder how handicapped that child really would have been, and she adds to her sadness of carrying a sick child the guilt of terminating its life. Even babies with anomalies precluding survival bring joy and happiness to their parents for the hours or days they can be held and loved.

I urge you to vote against this bill.

Julie A. Mickelson, MD

***Hello my name is JoAnn Jones Holden  
and I am here to testify in opposition to  
Senate Bill 398***

**It will be 24 years ago this October (1984). Life was good, I was dating someone that I loved; I had a loving supportive family and a decent job.**

**I had been raised in church and thought I had a pretty secure grasp on right and wrong. Though now looking back I realize that a lot of those lines of right and wrong were blurred through years of sexual abuse. All of which had left me with a bit of a void spiritually. I see now that I was searching for love and finding it in all the wrong places.**

**After dating a few months I found I was pregnant. I went to him and received what I have now learned is a pretty common response from a 20 year old man....He asked me if it was his. I told him it was and was hurt and angry that he could have thought otherwise and didn't see him again for a few days. During that time I talked with my sister who believe or not had just found out that SHE was pregnant also, her proposed solution to my situation seemed reasonable. It was one that I knew a number of young women in my high school class had also seen as the answer to their problem of pregnancy. AN ABORTION There was a very active Planned Parenthood in Wild Rose, which is where my mother worked. In high school we used to be proud of the fact that we only lost one girl out of our graduating class to teenage pregnancy but we lost 5 babies to abortion maybe more out of a town of a little over 700 people and a graduating class of 59 less than half were girls and 5 had had abortions before graduation those are not great odds if you are a baby. Within 24 hours I had an offer to pay and an appointment made and found myself in the abortion clinic in Appleton. The day was cold and rainy I remember nothing about the ride to or from the clinic. I do remember vividly being ushered into the clinic by someone on the staff from the clinic and taken into a very small and sterile room where I was handed a paper to sign and a pamphlet explaining the procedure and told to take off my**

clothes and put on a gown and someone would be back to get me. I never read the pamphlet or even opened it to be honest. I put it in my purse and waited. I was taken to another office and laid on an exam table like those in a gynecologist office with stirrups; my feet were placed into the stirrups and a paper gown draped across my legs. People spoke among themselves obviously forgetting I was in the room. Across the room a man entered gowned up with a mask on and never spoke a word. He took his place on a stool at the end of the exam table, I heard the suction machine start, and before I knew it I was back home bleeding and crying and feeling like possibly the WORST person in the world. I was cramping and bleeding so bad I was forced to call in to work and tell them I wouldn't be there that evening. And then something very unexpected happened, I got into the shower hoping to find some relief from the pain, I was bleeding so profusely that being in the shower didn't slow the flow and I looked down at the bloody water collecting in the tub to find the mass of tissue which I call my baby.

The next six months were what I affectionately refer to as an Alcoholic Blur....I don't have any memory of what went on during that time except that I was drunk. It all came to a head by my threatening suicide and my family taking me and having me admitted on the Psyche floor of Theda Clark and keeping me there for the next two weeks for AODA counseling and drying out. But God in his awesome infinite wisdom and grace had a bigger plan. He was just keeping me safe while my sisters baby was born. He knew exactly what I could and couldn't deal with at that point and kept me in a safe place for that birth.

But not adequately dealing with the pain of that birth was just the beginning of not dealing with the pain of the abortion that has lasted now some 20 plus years. This has taken me through endless counseling sessions and bouts of antidepressants and a couple bad marriages and an endless sea of BAD decisions, looking to fill that void that was left. Within a year of that abortion I found myself intentionally getting pregnant again. My atonement Child. That child gave me reason to live and got me through some of the

**toughest years of my life.**

**This brings me up to almost 10 years ago when I found myself searching for more meaning in my life, and a new church, after one of my divorces, God put me in a *VERY* safe place when the next trauma happened. My nephew, who I had been there to help raise and was extremely close to, committed suicide. His death alone was incredibly hard to deal with I couldn't make sense of it and I was angry and hurt and grieving and trying to make sense of a senseless situation and on top of that grief I spoke to his girlfriend at the funeral and she said that he did this because she had had an abortion a few weeks earlier and hadn't told him about it until after the fact.**

*Abortion has now cost my family 3 lives.*

**I was devastated. But truly I didn't understand why I was so upset. MY abortion had been years ago. Could this be after math of that decision made all those years ago? I now know that women who suffer from Post Abortive Syndrome frequently will grieve that loss again and again through out life when she experiences any new loss. Which was confirmed when I lost my mother this past spring.**

**Through a group called Rachels Vineyard I was able to begin my healing from this atrocity you refer to as choice. I was able to begin to grieve the loss of my child and then be forgiven for the murder I had committed. I could finally release the anger and guilt , remorse and bitterness....which taken over my life.**

**I guess in summation...i didn't believe that this had been a problem for me. The shame and guilt kept me from seeing the true pain. None of the counselors ever mentioned it was an issue. None of the doctors said it might be part of the problem and seriously it was just a procedure no reason to grieve. There are millions of women (and men)(they feel that loss too) that are struggling with this same issue. It was so prevalent in the lives of my self and my friends growing up in a town the size of Wild Rose you know it has touched almost everyone in some way.**

**Seldom do people realize what it is that they have done until they come to have this relationship with the Lord and know the price he paid with his life, then we are able to put**

**a price tag on the life that we took?**

**In prayer 3 plus years ago now a piece of scripture was revealed to me It is.... *Proverbs 31:8 Speak up for those who cannot speak for themselves; ensure justice for those who are perishing.* I wasn't sure how to do this but knew in my heart that what I needed to do. AS it turns out seems that it is here today testifying to you in this room and marching for life in Washington DC and speaking for pro life groups through out the state. Through Wisconsin Right to Life and Silent No More, the I am speaking the truth of my ordeal and using that to touch the lives of other that have also been scarred by the lies of the abortionist Through the group called Silent No More and Wisconsin Right to Life I have been given a voice to tell people about abortion and to let people know that abortion hurts women.**

My name is Angel Petite. I am eighteen, and I live in Oakland, WI.

I was born prematurely, when I was 27 weeks old. Many unborn children are aborted at that age, but I survived. I am a survivor, because I am alive while many of my generation weren't given a chance to live.

At 27 weeks, I had a heartbeat, brain waves, was able to sense and respond to pain, and every system found in a fully developed adult was present. Even though I was so developed, I still could have been aborted, and my life would have ended. I would not have been able to meet my family, to attend school, to grow up, to participate in my government, or to sit before this committee today. I was not aborted however, so I am able to pursue my dreams, to work for the betterment of the world, and to have a voice. I am here, speaking for those who have no voice. A quarter of my generation wasn't granted that privilege. They cannot argue on their behalf; they cannot aid in coming up with solutions for the problems this world faces. They cannot do this, but I can. That is why I am here today. Every human being, every American, every Wisconsinite deserves a chance at life.

940.04 defends this fundamental principle and guarantees this right.

I ask you to reject SB 398, because it would repeal the Wisconsin statute 940.04. This statute prohibits abortions in Wisconsin except when the mother's life is in danger. The law is over 150 years old and should remain on Wisconsin law books.

One reason that 940.04 should be kept is because it would be able to protect innocent unborn children and their mothers from the horror and atrocity of abortion if Roe v. Wade was overturned. The state of Wisconsin should strive to protect all Wisconsinites and this law furthers that protection.

My name is Karen Mahoney and I am testifying in opposition of Senate Bill 398.

Twenty-eight years ago my left hand clutched a wad of wrinkled money as I entered a Milwaukee Abortion Clinic—the cash was the only act of support that my then boyfriend could muster.

The hasty nurse emphasized that the procedure only took a few minutes and wouldn't hurt. As I began to cry, she reassured me that I was 'really lucky' because I was catching it early as there was no baby yet—just a mass of tissue.

Hypnotized by the lights, the dirty carpet and the rows of empty faced women awaiting their turn, I passed the time looking at booklets given to me by the receptionist, describing minimal side effects and rare long-term health risks. The booklets told me not to feel guilty because many women have had multiple abortions—most are risk free and the women go on to live healthy normal lives.

I was given a number for privacy, #187 and when it was called, I walked to the closet draped with an orange flowered curtain. I put on blue paper slippers, a thin grey and white gown and walked to the procedure room.

The nurse tried to make me laugh by telling me that I would be able to keep my thin shape and not have the stretch marks associated with a pregnancy. I began to feel very sad, but didn't recall anything in the booklets mentioning sadness. She told me not to cry because I would feel better once it was over—everyone does, she said.

Legs in the stirrups, the vacuum machine whirled as the doctor inserted the long tube into my vagina. A moderate amount of cramping accompanied me as I watched the jar fill with blood, water and chunks of tissue. I felt sheer horror, as I knew for the first time what I had really done. Nothing that the nurse or doctor said at that point could convince me otherwise. I had authorized the killing of my own baby.

The days that followed were a blur of numbness and despair. I cried constantly, but kept my feelings secret. No one except my boyfriend knew that I had done this, and he didn't seem to care. No one helped me. No one understood—I felt so alone.

For years, I eked my way through life. My faith nearly destroyed, I settled into a bad marriage that ended in divorce 18 years later. The birth of each of my five children, while wonderful, served to solidify in my heart what I had done. I allowed my first child to be murdered and I couldn't keep that silent any longer.

Finally, I began to search out help and begin to recover—I am not there yet, and I don't know that I will ever be because there is nothing that will undo the abortion. What I can do is to urge each one of you to prevent this tragedy from happening to any other baby or young mother in this state. Please, we give our animals more respect than we do human beings. Please vote against Senate Bill 398 and vote to save 940.04. Thank you.

Testimony regarding s.940.04 and SB 398 to the Wisconsin Senate Committee on Health, Human  
Services, Insurance and Job Creation

Carla Borstad

February 27, 2008

Hello, my name is Carla Borstad. I am a senior nursing student at the University of Wisconsin-Eau Claire. One week ago I would have thought that today I would be on a cardiology unit in an Eau Claire hospital as a student nurse caring for people whose lives are precious. Instead, I am here in our state capitol asking you, some of the leaders of our state, to care for people whose lives are precious and whose voices are not heard.

I ask you, members of the committee, to save statute 940.04 for the following three reasons:

First, I want Wisconsin to be a state in which God is honored by how we treat His creation. Each unborn child is made by God. I am sure many of you are familiar with the verses from Psalm 139:13-14 which say "For You formed my inward parts; You wove me in my mother's womb. I will give thanks to You, for I am fearfully and wonderfully made; Wonderful are Your works, And my soul knows it very well." I will say it again. I want Wisconsin to be a state in which God is honored by how we treat His creation.

Second, I want Wisconsin to be a state in which unborn children have full protection under our law. I do not want Wisconsin to be a state in which unborn, precious babies are burned, torn apart, or killed in any other way while our leaders turn their backs and pretend as if they did not know what was happening. So I will say it again, I want Wisconsin to be a state in which unborn children have full protection under our law.

And third, I want Wisconsin to be a state in which pregnant women who are scared and confused will receive compassionate, truthful, hopeful assistance in giving their children life. I do not want women in our state to be victimized by people in the abortion industry. A pregnant woman in Wisconsin should not be defiled by an abortionist killing the child within her and she should not be lied to by counselors who do not acknowledge that something horrid was done to her. Instead, I want Wisconsin to be a state in which a pregnant woman who is scared and confused will receive compassionate, truthful, hopeful assistance in giving her child life.

Please, Senator Erpenbach, Senator Vinehout, Senator Carpenter, Senator Taylor, Senator Roessler, Senator Lazich, and Senator Kanavas, honor God, protect unborn children and protect pregnant woman by saving statute 940.04.

Thank you.



## Hearing Testimony for Senate Bill 398

My name is Anna Anderson. I am the Executive Director of the Care Net Pregnancy Center of Green County in Monroe, WI. I am here today to testify in opposition of Senate Bill 398. I would like to share with you stories of men and women who come to our center seeking relief from psychological distress they experience after making an abortion decision as well as some statistics associated with our post-abortion healing program.

A 15 y/o girl who had an abortion six months earlier at the age of 14 came to the Center begging us to help her stop the nightmares she had been having since her abortion. She told us she had not had a full night's sleep since her abortion because of horrific nightmares about dead babies. She had insomnia because she feared falling asleep and those nightmares returning. She also reported feelings of extreme guilt, anger and rage. She experienced flashbacks to the abortion procedure. She was depressed and her self-esteem was at an all time low.

Recently, I met with a 22y/o woman who stated she is not "worthy" of anything good because she "chose to take the life" of her child. She reported excessive crying, anger and rage toward her boyfriend and herself, and an inability to make decisions. Relationships with family members were becoming strained because she was withdrawing.

A woman in her 70s told me she cannot get the images of that day decades ago at the abortion facility out of her mind. She described in great detail every aspect of her abortion experience from the moment she drove into the parking lot. She still sees the faces of everyone she encountered that day. She told me these vivid images are always with her and she can't make them stop.

The father of a 17y/o girl came to the Center very distraught and pleaded with us to help his daughter in anyway possible so she would have the means and courage to stand up to those who were trying to force her into an abortion. He told us not a day goes by that he does not think of the abortion he paid for when he was in college. He agonizes daily over his decision to pay to end the life of his first son or daughter. He said it was his agony over this decision that led him to try to drown out his emotions with alcohol and eventually drugs. He did not want his daughter to go through what he described as the "emotional hell" that he had been experiencing for more than 20 years.

Then there were the never-to-be grandparents who came to us for help because they made the choice for their teenaged daughter to have an abortion. As a result of their decision, they will never be grandparents of biological offspring because their only child's fallopian tubes were damaged beyond repair during the abortion procedure. They struggle with tremendous guilt.

These are just a few of the stories we hear from post-abortive men, women and families. There are lifelong consequences to the choice of abortion that affect marriages, parenting, friendships, and other relationships for decades. These consequences can be both physical and psychological.

When women and men come to us for help with their post-abortion stress, we ask them to outline the physical and psychological impact of their abortion experience and why they

came to us for help. These personal accounts from our post-abortive men and women tell us that they believe the following things resulted from their abortion decisions:

- 54 % sought professional counseling to help them alleviate the psychological and emotional distress they felt after their abortion experience;
- 38 % engaged in self-destructive behaviors;
- 29 % report being uncomfortable around children after their abortion;
- 15 % report undue anger towards children;
- 58 % say they are very overprotective of their subsequent children;
- 62 % report having difficulty with relationships;
- 46 % report avoiding relationships with the opposite sex;
- 33 % report becoming too dependent in the relationship;
- 82 % report problems with intimacy since the abortion;
- 90 % of the people who were single at the time of the abortion say their relationship with their significant other ended after the abortion; and
- 64 % of all relationships ended after the abortion when combining married and single couples.

Some of the medical complications reported by our clients as a result of an abortion procedure include:

- 15 % report hemorrhaging excessively and/or for extended periods of time;
- 8 % experienced infections and/or high fevers;
- 46 % report intense pain;
- 8 % had an incomplete abortion;
- 8 % had a perforated uterus;
- 8 % had other uterine complications;
- 15 % had to have hysterectomies;
- 8 % became anemic;
- 15 % report infertility following their abortion;
- 15 % of the women report menstrual disorders;
- 15 % report tubal pregnancies;
- 23 % experienced miscarriages;
- 8 % have a scarred uterus;
- 8 % experience headaches; and
- 8 % have Pelvic Inflammatory Disease.

In addition, the post-abortive men and women who come to us for help report the following psychological complications that they associate with their abortion decision:

- 79 % report guilt over their decision;
- 64 % report anger and rage;
- 29 % experience flashbacks;
- 64 % experience feelings of helplessness;
- 29 % have sexual disorders;
- 14 % report a hatred of the opposite sex;
- 21 % have eating disorders;
- 79 % report not being able to forgive themselves;
- 14 % report an inability to bond with their living children;
- 7 % say they had difficulty making decisions after their abortion;
- 64 % experience grief;
- 29 % experience nightmares;

- 29 % became suicidal after their abortion;
- 57 % report feelings of despair;
- 29 % fear future pregnancies;
- 64 % turn to alcohol and/or drugs to alleviate their emotional pain;
- 38 % report marital problems associated with the abortion;
- 7 % report compulsive behaviors;
- 50 % say they have a tendency to over-react toward their living children;
- 64 % report bonding issues since the abortion;
- 86 % experience depression;
- 38 % become passive-aggressive in their relationships;
- 64 % report excessive crying;
- 71 % report a mistrust of others;
- 86 % have lower self esteem as a result of their abortion decision;
- 64 % report increased stress;
- 100% of those responding say they experienced some degree of withdrawal;
- 80 % say they became sexually promiscuous after their abortion; and
- 40 % report feeling powerless.

With the exception of one teen who came in six months after her abortion, the women and men we have seen at our center for post abortion healing suffered with these psychological and emotional complications for years before seeking help. 64% waited 7-9 years before seeking help. Others waited more than 30 years before seeking help.

When we ask why they finally seek help for what they believe to be the psychological and emotional consequences of their abortion decisions, couples and individuals make comments such as the following:

- "So it can help me through my problems of anger, guilt, flashbacks, and nightmares. I want to be able to sleep. I don't want to be depressed any more. I want to be able to forgive myself and regain my self esteem."
- "Because it was bothering me so much I couldn't function. I knew I had to talk to someone and get help to deal with it."
- "To save my marriage."
- "Because I was completely, emotionally exhausted and had no other resource to save our marriage and family. I was at wit's end."

Abortion not only hurts the man and woman involved in the abortion decision but everyone in their lives is affected by this because of the emotional baggage that accompanies such a decision. When we consider that at least 1 in 4 women (and some estimate 1 in 3) has had an abortion, the ramifications of this psychological distress are far-reaching and can impact generations.

In conclusion, I would encourage you to carefully consider how abortion hurts men, women and families. After this careful consideration, I would respectfully request that you vote against Senate Bill 398. Thank you.



WISCONSINRIGHTTOLIFE

**TESTIMONY**

**In opposition to SB 398**

**Senate Committee on Health, Human Services, Insurance and Job Creation**

**February 27, 2008**

**Barbara L. Lyons  
Executive Director  
Wisconsin Right to Life**

I am Barbara Lyons, Executive Director of Wisconsin Right to Life. Thank you, Mr. Chairman and committee members, for the privilege of testifying in *opposition* to SB 398.

Abortion is a tragic act that has failed miserably in our state and country. Viewed back in 1973 as a panacea for a myriad of social ills, legal abortion throughout the full nine months of pregnancy has solved none of them. Women are harmed, fathers have no say in the destruction of their children, marriages and families are more unstable, and child abuse and neglect have increased dramatically over the past 35 years. The most egregious result -- we have 50 million dead who were never given a chance at life.

Technology has irrevocably answered what seven U.S. Supreme Court Justices could not divine back in 1973 -- the question of when human life begins. We now know beyond a shadow of a doubt, through the beauty of ultrasound and the advent of in vitro fertilization, that every unborn child is a unique, living member of the human family at the time of fertilization. To say otherwise is to deny reality. To say it doesn't matter means that any vulnerable human life can be subject to destruction for the rationale of the day.

Section 940.04 of the Wisconsin statutes originated 150 years ago. This law, which prohibits the killing of unborn children, says a lot about our state and the concern we have for the welfare of human beings, including those who live in the mother's womb. It is as important to keep this law now as it was at its origin.

It is equally important to be concerned about the welfare of women. That is why s. 940.13 was enacted in 1985 -- to ensure that women are not prosecuted or penalized by fine or imprisonment for having procured an abortion. Wisconsin Right to Life spearheaded the creation of s. 940.13 which negates the impact of s. 940.04 (3) and (4). It is unconscionable for the promoters of SB 398 to continuously claim that women will go to prison unless s. 940.04 is repealed because it is blatantly false.

50 million legal abortions have been performed in our country since 1973. Statistics reveal that 36% are performed on African-American women, a grossly disproportionate number to this ethnic group's population as 13% of Americans. Roughly 18 million African-American babies have been destroyed by abortion.

In Wisconsin, the number of abortions performed since 1974 is over 490,000. Imagine -- 490,000 of our Wisconsin family who were never given a chance. At 24% of Wisconsin abortions performed, over 117,000 African-American babies are not with us.

In acts of sheer discrimination, babies with disabilities, especially those with Down syndrome, are destroyed in large numbers, simply because they are not perfect and need more of our care.

Since 48% of abortions are repeats, a woman who aborts has already had one, two, or perhaps five previous abortions. These numbers leave no doubt that abortion is being used as a means of birth control.

More women are reporting that their abortions are coerced by threat or intimidation. Science tells us that babies experience significant pain from abortion, especially at 20 weeks or beyond.

And now, proponents of abortion who are backing SB 398 say it isn't enough. We need to continue this scourge on the Wisconsin landscape once *Roe v. Wade* is overturned by repealing s. 940.04.

For the sake of humanity, decency, and human rights, Wisconsin Right to Life urges you to reject SB 398. Let's turn the page and remain a state that believes in the hope and promise of the future by allowing everyone to have a chance to live. Thank you.

February 27, 2008

**Testimony in Opposition to Senate Bill 398**

**My name is Dr. Tim Deering. I am a medical doctor. I am board-certified as a family physician. After graduating from Vanderbilt University School of Medicine in Nashville, Tennessee, I served my residency in family medicine at the University of Wisconsin, Madison in the Baraboo Rural Training Track.**

**I have been practicing medicine for 10 years - 5 years in Dane and Sauk Counties and 5 years in rural California. I presently practice with Medical Associates of Baraboo and I am clinical assistant faculty of the Baraboo Rural Training Track. I practice the full-spectrum of family medicine; I care for unborn children, pregnant mothers and deliver newborns. I also care for babies, children, adolescents, men, women and the elderly.**

**I am testifying in opposition to Senate Bill 398. Abortion hurts women – physically and emotionally. I urge you to vote against Senate Bill 398.**

**In the past three weeks alone three women have shared with me the physical and emotional pain that they and others have suffered from abortion. The first woman was a registered nurse who works in Labor and Delivery at St. Clare Hospital in Baraboo. She had left a job in suburban Chicago under duress because of her unwillingness to be participate in abortions provided there. When she was making her decision to follow her conscience to not participate in abortions and ultimately forced to leave she was labeled as intolerant and ridiculed by peers and supervisors. The second person was an 18-year old girl who at 17, a year prior, had been forced into having an abortion by her older boyfriend and his parents; she told me of her unresolved guilt, her anger, her frustration and her bitterness. Her psychological distress had led to depression and contributed to chronic abdominal pain. The third woman was a hospital caseworker who shared her deep personal grief and need for healing, counsel and therapy after learning from her 25-year-old adult daughter that that this**

daughter had an abortion at 19 years of age. The adult daughter had told her mom 6 years after the event because of her own grief, depression and despair. The mother told me "I am grieving the grandchild I never met" and also spoke of the pain she felt at her daughter's own grief. One abortion had led to devastating anguish in two generations.

**Abortion hurts women – physically and emotionally.**

**Abortion can cause physical and emotional problems that have not been adequately considered, studied or communicated by the medical community, nor are they adequately communicated to women who have an abortion. Physical concerns include the risk of infection, future pregnancy complications and pregnancy losses, infertility, chronic pain and even risk of death. Emotional and psychosocial concerns include unresolved grief, anger, guilt, hostility, decreased self-esteem, increased psychiatric hospitalization, depression, anxiety, post-traumatic stress disorder, suicidality, increased rates of substance abuse, impairments in interpersonal relations and sexual dysfunction, as well as interrupted bonding and decreased emotional support for children. Abortion is not benign.**

**Abortion is not just a "choice". Abortion hurts women – physically and emotionally. I urge you to vote against Senate Bill 398.**

**----- 3 Minute Time Limit -----**

**Further data to support the manners abortion hurts women – physically and emotionally follow. National statistics on abortion show that 10% of women undergoing induced abortion suffer from immediate physical complications, of which one-fifth (2%) were considered major.**

**Over one hundred potential complications have been associated with induced abortion. "Minor" complications include: minor infections, bleeding, fevers, chronic abdominal pain, gastro-intestinal disturbances, vomiting, and Rh sensitization.**



The most common "major" complications are infection, excessive bleeding, embolism, ripping or perforation of the uterus, anesthesia complications, convulsions, hemorrhage and cervical injury.

In a series of 1,182 abortions which occurred under closely regulated hospital conditions, 27 percent of the patients acquired post-abortion infection lasting 3 days or longer.

While the immediate complications of abortion are usually treatable, these complications frequently lead to long-term reproductive damage of much more serious nature.

For example, one possible outcome of abortion related infection is sterility. Researchers have reported that 3 to 5 percent of aborted women are left inadvertently sterile as a result of the operation's latent morbidity. The risk of sterility is even greater for women who are infected with a venereal disease at the time of the abortion.

In addition to the risk of sterility, women who acquire post-abortion infections are five to eight times more likely to experience ectopic pregnancies. Between 1970-1983, the rate of ectopic pregnancies in USA has risen 4 fold. Twelve percent of all maternal deaths are due to ectopic pregnancy. Other countries which have legalized abortion have seen the same dramatic increase in ectopic pregnancies.

Cervical damage is another leading cause of long term complications following abortion. Normally the cervix is rigid and tightly closed. In order to perform an abortion, the cervix must be stretched open. During this forced dilation there is almost always causes microscopic tearing of the cervical tissue

According to one hospital study, 12.5% of first trimester abortions required stitching for cervical lacerations. Unfortunately such attention to detail is not normally provided at free- standing outpatient abortion clinics. Women under 17 have been found to face twice the normal risk of suffering cervical damage due to the fact that their cervixes are immature and developing.

The cervical damage from abortion frequently results in a permanent weakening of the cervix. This weakening may result in an "incompetent cervix" which, unable to carry the weight of a later "wanted" pregnancy, opens prematurely, resulting in miscarriage or premature birth. Studies show cervical damage from previously induced abortions increase the risks of miscarriage, premature birth, and complications of labor during later pregnancies by 300 - 500 percent. When the risks of increased pregnancy loss are projected on the population as a whole, it is estimated that aborted women lose 100,000 "wanted" pregnancies each year because of latent abortion morbidity. In addition, premature births, complications of labor, and abnormal development of the placenta, all of which can result from latent abortion morbidity, are leading causes of handicaps among newborns.

Looking at premature deliveries, it is estimated that latent abortion morbidity results in 3000 cases of acquired cerebral palsy among newborns each year. Finally, since these pregnancy problems pose a threat to the health of the mothers too, women who have had abortions face a 58 percent greater risk of dying during a later pregnancy.

The stories I told illustrate only the tip of the iceberg on the psychological consequences of abortion. Researchers investigating post-abortion reactions report only one possible positive emotion: relief. This emotion is understandable, especially in light of the fact that the majority of aborting women report feeling under intense pressure to "get it over with."

Temporary feelings of relief are frequently followed by a period psychiatrists identify as emotional "paralysis," or post-abortion "numbness." Like shell-shocked soldiers, these aborted women are unable to express or even feel their own emotions. Their focus is primarily on having survived the ordeal, and they are at least temporarily out of touch with their feelings.

Studies within the first few weeks after the abortion have found that between 40 and 60 percent of women questioned report negative reactions. Within 8 weeks after their

abortions, 55% expressed guilt, 44% complained of nervous disorders, 36% had experienced sleep disturbances, 31% had regrets about their decision, and 11% had been prescribed psychotropic medicine by their family doctor.

In one study of 500 aborted women, researchers found that 50 percent expressed negative feelings, and up to 10 percent were classified as having developed "serious psychiatric complications." In a study of teenage abortion patients, half suffered a worsening of psychosocial functioning within 7 months after the abortion. The immediate impact appeared to be greatest on the patients who were under 17 years of age and for those with previous psychosocial problems. Symptoms included: self-reproach, depression, social regression, withdrawal, obsession with need to become pregnant again, and hasty marriages.

The best available data indicates that on average there is a five to ten year period of denial during which a woman who was traumatized by her abortion will repress her feelings. During this time, the woman may go to great lengths to avoid people, situations, or events which she associates with her abortion and she may even become vocally defensive of abortion in order to convince others, and herself, that she made the right choice and is satisfied with the outcome. In reality, these women who are subsequently identified as having been severely traumatized, have failed to reach a true state of "closure" with regard to their experiences.

Repressed feelings of any sort can result in psychological and behavioral difficulties, which exhibit themselves in other areas of one's life. An increasing number of counselors are reporting that unacknowledged post-abortion distress is the causative factor in many of their female patients, even though their patients have come to them seeking therapy for seemingly unrelated problems.

Other women, who would otherwise appear to have been satisfied with their abortion experience, are reported to enter into emotional crisis decades later with the onset of menopause or after their youngest child leaves home.

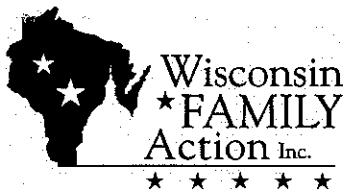
Numerous researchers have reported that post abortion crises are often precipitated by the anniversary date of the abortion or the unachieved "due date." These emotional crises may appear to be inexplicable and short-lived, occurring for many years until a connection is finally established during counseling sessions.

A 5-year retrospective study in two Canadian provinces found that 25% of aborted women made visits to psychiatrists as compared to 3% of the control group.

Women who have undergone post-abortion counseling report over 100 major reactions to abortion. Among the most frequently reported are: depression, loss of self-esteem, self-destructive behavior, sleep disorders, memory loss, sexual dysfunction, chronic problems with relationships, dramatic personality changes, anxiety attacks, guilt and remorse, difficulty grieving, increased tendency toward violence, chronic crying, difficulty concentrating, flashbacks, loss of interest in previously enjoyed activities and people, and difficulty bonding with later children.

Among the most worrisome of these reactions is the increase of self-destructive behavior among aborted women. In a survey of over 100 women who had suffered from post-abortion trauma, fully 80 percent expressed feelings of "self-hatred." In the same study, 49 percent reported drug abuse and 39 percent began to use or increased their use of alcohol. Approximately 14 percent described themselves as having become "addicted" or "alcoholic" after their abortions. In addition, 60 percent reported suicidal ideation, with 28 percent actually attempting suicide, of which half attempted suicide two or more times.

Again, abortion is not just a "choice". It is a decision that has profound consequences for physical and emotional wellbeing of women who are usually not adequately warned of its risks. Abortion hurts women – physically and emotionally. I urge you to vote against Senate Bill 398.



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Testimony in Opposition to Senate Bill 398  
Senate Committee on Health, Human Services, Insurance, and Job Creation  
By Julaine K. Appling, CEO  
February 27, 2008

Thank you, Chairman Erpenbach and committee members, for the opportunity to testify on Senate Bill 398. My name is Julaine Appling, and I am presenting this testimony today as president of Wisconsin Family Action, the legislative action arm of Wisconsin Family Council.

Wisconsin Family Action is opposed to SB 398.

I must admit that I am somewhat baffled by the purpose of this bill. SB 398 would repeal Wisconsin statute 940.04—the statute criminalizing the abortion of an unborn child. However, since the 1973 US Supreme Court decision in *Roe v. Wade*, Wisconsin's abortion ban has been unenforceable. The current statutes are hurting absolutely no one—they cannot be enforced.

However, let's assume for a moment that this piece of legislation was actually relevant, that *Roe v. Wade* was overturned and that the decision to prohibit, regulate or allow abortion was back in the hands of the states. Where does statute 940.04 fit at that point? First, Article I, Section I of the Wisconsin Constitution guarantees life, liberty and the pursuit of happiness to all people. That makes it clear that it is perfectly appropriate for government to protect innocent life and punish those who take life, which is what Statute 940.04 stipulates. We're talking about unborn human life in this instance, and the state should absolutely give that life the benefit of the doubt.

If the above scenario became reality, Wisconsin is then in the position of giving the benefit of doubt to life—and has a means already in place that punishes those who knowingly perform procedures that destroy unborn human life.

Frankly, the burden of proof lies with the authors and proponents of this bill to prove that removing the statute in question is appropriate, to show somehow that it is not the state's responsibility to protect innocent, helpless life. I submit to you that it is *always* the state's duty to protect innocent, helpless life and that protecting life was the purpose of this statute. This abortion criminal code is an appropriate safeguard in the event that the decision to regulate abortion is returned to the states. In that case, Wisconsin would be one of just four states that has a criminal code for abortion on the books, ready to be enforced.

Lifting an unenforceable ban of this nature on the presumption that it might eventually become enforceable under a certain set of circumstances is illogical at best and irresponsible at worst. We have no idea what the circumstances might be that would possibly overturn the current federal sanction of abortion. In the event the federal sanction is overturned, instead of rushing to try to create new criminal code and regulations, having the debate and engaging what could likely be a protracted legislative process while babies were being killed, we would be prepared with Statute 940.04. Keeping the statute in place gives the benefit of doubt exactly where it should be given—to the unborn human lives.

It is also important to remember that the only reason this statute is not enforceable right now is not that the expressed will of the people of Wisconsin has changed, but rather that we had a 5-4 vote in the US Supreme Court that imposed this situation on all of us.

The testimony provided today by others will lay to rest the argument that this statute would result in women who abort their babies being thrown into prison. Other statutory provisions clearly prevent that.

As duly elected officials, I submit to you that it is your duty to protect life. Statute 940.04 protects the most vulnerable life of all—the unborn child. It is far more reasonable and responsible for this legislature to leave the statute in place, unenforceable though it may be right now, and in so doing give the benefit of the doubt and the presumption of innocence to the unborn children who might one day be affected by this statute.

For all of these reasons, Wisconsin Family Action is opposed to SB 398, and I urge this committee to honor established Wisconsin statute and err on the side of protecting the life of the innocent unborn. A vote against SB 398 would accomplish both.

Thank you.

God 1st Command

(Ralph Lang 2.27.08

Genesis 1:28

Be fertile and multiply; fill the earth and subdue it. <sup>In marriage</sup>

Now read Psalm 127<sup>1293</sup> The Need of God's Blessing  
About children

Read about It in New American Bible  
in Deut 5-7

## THE TEN COMMANDMENTS

<sup>11</sup> Post Them on your door post

The Law was given through Moses; Grace and Truth came through Jesus Christ (John 1:17).

These are the Commandments that God gave to man to guide him to happiness in this life and the next:

### I I AM THE LORD THY GOD: THOU SHALT NOT HAVE STRANGE GODS BEFORE ME.

**COMMANDS:** faith, hope, love and worship of God, reverence for holy things, prayer.

**FORBIDS:** idolatry, superstition, spiritism, tempting God, sacrilege, attendance at false worship.

### II THOU SHALT NOT TAKE THE NAME OF THE LORD THY GOD IN VAIN.

**COMMANDS:** reverence in speaking about God and holy things; the keeping of oaths and vows.

**FORBIDS:** blasphemy, the irreverent use of God's name, speaking disrespectfully of holy things, false oaths, and the breaking of vows.

### III REMEMBER THOU KEEP HOLY THE SABBATH DAY.

**COMMANDS:** going to Church on Sundays and holy days.

**FORBIDS:** missing Church through one's own fault; unnecessary servile work; public buying and selling; court trials.

### IV HONOR THY FATHER AND MOTHER.

**COMMANDS:** love, respect, obedience on the part of children; care on the part of parents for the spiritual and temporal welfare of their children; obedience to civil and religious superiors.

**FORBIDS:** hatred of parents and superiors; disrespect; disobedience.

*provided they are following God*

*commandments.*

**V THOU SHALT NOT KILL.**

**COMMANDS:** safeguarding of one's own life and bodily welfare of others.

**FORBIDS:** unjust killing, suicide, abortion, sterilization, dueling, endangering life and limb of self or others.

**VI THOU SHALT NOT COMMIT ADULTERY.**

**COMMANDS:** chastity in word, and deed.

**FORBIDS:** obscene speech; impure actions alone or with others.

**VII THOU SHALT NOT STEAL.**

**COMMANDS:** respect for the property and rights of others; the paying of just debts; paying just wages to employees; integrity in public officials.

**FORBIDS:** theft, damage to the property of others; not paying just debts; not returning found or borrowed articles; giving unjust measure or weight in selling; not paying just wages; bribery; graft; cheating; fraud; accepting stolen property; not giving an honest day's work for wages received; violation of contract.

**VIII THOU SHALT NOT BEAR FALSE WITNESS AGAINST THY NEIGHBOR.**

**COMMANDS:** truthfulness, respect for the good name of others; the observance of secrecy when required.

**FORBIDS:** lying, injury to the good name of others, slander, talebearing, rash judgment, contemptuous speech, and the violation of secrecy.

**IX THOU SHALT NOT COVET THY NEIGHBOR'S WIFE.**

**COMMANDS:** purity in thought.

**FORBIDS:** willful impure thoughts and desires.

**X THOU SHALT NOT COVET THY NEIGHBOR'S GOODS.**

**COMMANDS:** respect for the rights of others.

**FORBIDS:** the desire to take, to keep, or to damage the property of others.

*Luke 10:27 The Greatest Commandment*

*"You shall love the Lord, your God, with all your heart, with all your being, with all your strength, and with all your mind, and your neighbor as yourself."*



February 27, 2008

**Testimony in Opposition to Senate Bill 398**

**My name is Dr. Tim Deering. I am a medical doctor. I am board-certified as a family physician. After graduating from Vanderbilt University School of Medicine in Nashville, Tennessee, I served my residency in family medicine at the University of Wisconsin, Madison in the Baraboo Rural Training Track.**

**I have been practicing medicine for 10 years - 5 years in Dane and Sauk Counties and 5 years in rural California. I presently practice with Medical Associates of Baraboo and I am clinical assistant faculty of the Baraboo Rural Training Track. I practice the full-spectrum of family medicine; I care for unborn children, pregnant mothers and deliver newborns. I also care for babies, children, adolescents, men, women and the elderly.**

**I am testifying in opposition to Senate Bill 398. Abortion hurts women – physically and emotionally. I urge you to vote against Senate Bill 398.**

**In the past three weeks alone three women have shared with me the physical and emotional pain that they and others have suffered from abortion. The first woman was a registered nurse who works in Labor and Delivery at St. Clare Hospital in Baraboo. She had left a job in suburban Chicago under duress because of her unwillingness to be participate in abortions provided there. When she was making her decision to follow her conscience to not participate in abortions and ultimately forced to leave she was labeled as intolerant and ridiculed by peers and supervisors. The second person was an 18-year old girl who at 17, a year prior, had been forced into having an abortion by her older boyfriend and his parents; she told me of her unresolved guilt, her anger, her frustration and her bitterness. Her psychological distress had led to depression and contributed to chronic abdominal pain. The third woman was a hospital caseworker who shared her deep personal grief and need for healing, counsel and therapy after learning from her 25-year-old adult daughter that that this**

daughter had an abortion at 19 years of age. The adult daughter had told her mom 6 years after the event because of her own grief, depression and despair. The mother told me "I am grieving the grandchild I never met" and also spoke of the pain she felt at her daughter's own grief. One abortion had led to devastating anguish in two generations.

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Abortion can cause physical and emotional problems that have not been adequately considered, studied or communicated by the medical community, nor are they adequately communicated to women who have an abortion. Physical concerns include the risk of infection, future pregnancy complications and pregnancy losses, infertility, chronic pain and even risk of death. Emotional and psychosocial concerns include unresolved grief, anger, guilt, hostility, decreased self-esteem, increased psychiatric hospitalization, depression, anxiety, post-traumatic stress disorder, suicidality, increased rates of substance abuse, impairments in interpersonal relations and sexual dysfunction, as well as interrupted bonding and decreased emotional support for children. Abortion is not benign.

Abortion is not just a "choice". Abortion hurts women – physically and emotionally. I urge you to vote against Senate Bill 398.

----- 3 Minute Time Limit -----

Further data to support the manners abortion hurts women – physically and emotionally follow. National statistics on abortion show that 10% of women undergoing induced abortion suffer from immediate physical complications, of which one-fifth (2%) were considered major.

Over one hundred potential complications have been associated with induced abortion. "Minor" complications include: minor infections, bleeding, fevers, chronic abdominal pain, gastro-intestinal disturbances, vomiting, and Rh sensitization.

The most common "major" complications are infection, excessive bleeding, embolism, ripping or perforation of the uterus, anesthesia complications, convulsions, hemorrhage and cervical injury.

In a series of 1,182 abortions which occurred under closely regulated hospital conditions, 27 percent of the patients acquired post-abortion infection lasting 3 days or longer.

While the immediate complications of abortion are usually treatable, these complications frequently lead to long-term reproductive damage of much more serious nature.

For example, one possible outcome of abortion related infection is sterility. Researchers have reported that 3 to 5 percent of aborted women are left inadvertently sterile as a result of the operation's latent morbidity. The risk of sterility is even greater for women who are infected with a venereal disease at the time of the abortion.

In addition to the risk of sterility, women who acquire post-abortion infections are five to eight times more likely to experience ectopic pregnancies. Between 1970-1983, the rate of ectopic pregnancies in USA has risen 4 fold. Twelve percent of all maternal deaths are due to ectopic pregnancy. Other countries which have legalized abortion have seen the same dramatic increase in ectopic pregnancies.

Cervical damage is another leading cause of long term complications following abortion. Normally the cervix is rigid and tightly closed. In order to perform an abortion, the cervix must be stretched open. During this forced dilation there is almost always causes microscopic tearing of the cervical tissue

According to one hospital study, 12.5% of first trimester abortions required stitching for cervical lacerations. Unfortunately such attention to detail is not normally provided at free- standing outpatient abortion clinics. Women under 17 have been found to face twice the normal risk of suffering cervical damage due to the fact that their cervixes are immature and developing.

The cervical damage from abortion frequently results in a permanent weakening of the cervix. This weakening may result in an "incompetent cervix" which, unable to carry the weight of a later "wanted" pregnancy, opens prematurely, resulting in miscarriage or premature birth. Studies show cervical damage from previously induced abortions increase the risks of miscarriage, premature birth, and complications of labor during later pregnancies by 300 - 500 percent. When the risks of increased pregnancy loss are projected on the population as a whole, it is estimated that aborted women lose 100,000 "wanted" pregnancies each year because of latent abortion morbidity. In addition, premature births, complications of labor, and abnormal development of the placenta, all of which can result from latent abortion morbidity, are leading causes of handicaps among newborns.

Looking at premature deliveries, it is estimated that latent abortion morbidity results in 3000 cases of acquired cerebral palsy among newborns each year. Finally, since these pregnancy problems pose a threat to the health of the mothers too, women who have had abortions face a 58 percent greater risk of dying during a later pregnancy.

The stories I told illustrate only the tip of the iceberg on the psychological consequences of abortion. Researchers investigating post-abortion reactions report only one possible positive emotion: relief. This emotion is understandable, especially in light of the fact that the majority of aborting women report feeling under intense pressure to "get it over with."

Temporary feelings of relief are frequently followed by a period psychiatrists identify as emotional "paralysis," or post-abortion "numbness." Like shell-shocked soldiers, these aborted women are unable to express or even feel their own emotions. Their focus is primarily on having survived the ordeal, and they are at least temporarily out of touch with their feelings.

Studies within the first few weeks after the abortion have found that between 40 and 60 percent of women questioned report negative reactions. Within 8 weeks after their

abortions, 55% expressed guilt, 44% complained of nervous disorders, 36% had experienced sleep disturbances, 31% had regrets about their decision, and 11% had been prescribed psychotropic medicine by their family doctor.

In one study of 500 aborted women, researchers found that 50 percent expressed negative feelings, and up to 10 percent were classified as having developed "serious psychiatric complications." In a study of teenage abortion patients, half suffered a worsening of psychosocial functioning within 7 months after the abortion. The immediate impact appeared to be greatest on the patients who were under 17 years of age and for those with previous psychosocial problems. Symptoms included: self-reproach, depression, social regression, withdrawal, obsession with need to become pregnant again, and hasty marriages.

The best available data indicates that on average there is a five to ten year period of denial during which a woman who was traumatized by her abortion will repress her feelings. During this time, the woman may go to great lengths to avoid people, situations, or events which she associates with her abortion and she may even become vocally defensive of abortion in order to convince others, and herself, that she made the right choice and is satisfied with the outcome. In reality, these women who are subsequently identified as having been severely traumatized, have failed to reach a true state of "closure" with regard to their experiences.

Repressed feelings of any sort can result in psychological and behavioral difficulties, which exhibit themselves in other areas of one's life. An increasing number of counselors are reporting that unacknowledged post-abortion distress is the causative factor in many of their female patients, even though their patients have come to them seeking therapy for seemingly unrelated problems.

Other women, who would otherwise appear to have been satisfied with their abortion experience, are reported to enter into emotional crisis decades later with the onset of menopause or after their youngest child leaves home.

Numerous researchers have reported that post abortion crises are often precipitated by the anniversary date of the abortion or the unachieved "due date." These emotional crises may appear to be inexplicable and short-lived, occurring for many years until a connection is finally established during counseling sessions.

A 5-year retrospective study in two Canadian provinces found that 25% of aborted women made visits to psychiatrists as compared to 3% of the control group.

Women who have undergone post-abortion counseling report over 100 major reactions to abortion. Among the most frequently reported are: depression, loss of self-esteem, self-destructive behavior, sleep disorders, memory loss, sexual dysfunction, chronic problems with relationships, dramatic personality changes, anxiety attacks, guilt and remorse, difficulty grieving, increased tendency toward violence, chronic crying, difficulty concentrating, flashbacks, loss of interest in previously enjoyed activities and people, and difficulty bonding with later children.

Among the most worrisome of these reactions is the increase of self-destructive behavior among aborted women. In a survey of over 100 women who had suffered from post-abortion trauma, fully 80 percent expressed feelings of "self-hatred." In the same study, 49 percent reported drug abuse and 39 percent began to use or increased their use of alcohol. Approximately 14 percent described themselves as having become "addicted" or "alcoholic" after their abortions. In addition, 60 percent reported suicidal ideation, with 28 percent actually attempting suicide, of which half attempted suicide two or more times.

Again, abortion is not just a "choice". It is a decision that has profound consequences for physical and emotional wellbeing of women who are usually not adequately warned of its risks. Abortion hurts women – physically and emotionally. I urge you to vote against Senate Bill 398.

Reference: Abortion data obtained from The Elliot Institute